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| Fill in this information to identify your c                            |                               |       |                   |
|--|-------------------------------|-------|-------------------|
| United States Bankruptcy Court for the:  NORTHERN DISTRICT OF ILLINOIS |                               |       |                   |
| Case number (if known):  | Chapter you are filing under: |       |                   |
|  | ✓ Chapter 7                   |       |                   |
|  | Chapter 11                    |       |                   |
|  | Chapter 12                    | □ Che | eck if this is an |
|  | Chapter 13                    |       | ended filing      |

### Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

### Part 1: Identify Yourself

|    |   | About Debtor 1:                                | About Debtor 2 (Spouse Only in a Joint Case): |
|----|---|--|---|
| 1. | Your full name  |  |   |
|    | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). | Joy First Name L Middle Name                   | First Name  Middle Name                       |
|    |   | Neely  |   |
|    | Bring your picture identification to your meeting   | Last Name                                      | Last Name                                     |
|    | with the trustee.   | Suffix (Sr., Jr., II, III)                     | Suffix (Sr., Jr., II, III)                    |
| 2. | All other names you   |  |   |
|    | have used in the last 8 years   | First Name                                     | First Name                                    |
|    | Include your married or   | Middle Name                                    | Middle Name                                   |
|    | maiden names.   | Last Name                                      | Last Name                                     |
| 3. | Only the last 4 digits of your Social Security  | xxx - xx - <u>7</u> <u>4</u> <u>1</u> <u>6</u> | xxx - xx                                      |
|    | number or federal<br>Individual Taxpayer  | OR   | OR  |
|    | Identification number   | 9xx - xx -                                     | 9xx - xx -                                    |

(ITIN)

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| Deb | otor 1            | Joy   | L             | Neely  | Case number (if kr | nown)   |
|-----|-------------------|---|---------------|--|--------------------|---|
|     |                   | First Name  | Middle Name   | Last Name  |                    |   |
|     |                   |   | About Debto   | or 1:  | About Debto        | r 2 (Spouse Only in a Joint Case):  |
| 4.  | and Er            | usiness names<br>mployer                          | ✓ I have n    | ot used any business names or EIN  | s.                 | ot used any business names or EINs.   |
|     | (EIN) y           | ication Numbers<br>you have used in<br>st 8 years | Business name |  | Business name      |   |
|     | Include           | e trade names and                                 | Business name |  | Business name      |   |
|     | uoing t           | Jusiness as names                                 | Business name |  | Business name      |   |
|     |                   |   | EIN           |  | EIN                |   |
|     |                   |   | EIN           |  | EIN                |   |
| 5.  | Where             | you live  |               |  | If Debtor 2 liv    | ves at a different address:   |
|     |                   |   | 2354 E 100    | th St  |                    |   |
|     |                   |   | Number Stre   | eet  | Number Stre        | eet   |
|     |                   |   |               |  |                    |   |
|     |                   |   | Chicago       | IL 60617   |                    |   |
|     |                   |   | City          | State ZIP Code   | City               | State ZIP Code  |
|     |                   |   | Cook          |  |                    |   |
|     |                   |   | County        |  | County             |   |
|     |                   |   | the one abov  | ng address is different from<br>/e, fill it in here. Note that the<br>d any notices to you at this<br>ess. | from yours,        | mailing address is different fill it in here. Note that the court notices to you at this mailing  |
|     |                   |   | Number Stre   | eet  | Number Stre        | eet   |
|     |                   |   | P.O. Box      |  | P.O. Box           |   |
|     |                   |   | City          | State ZIP Code   | City               | State ZIP Code  |
| 6.  |                   | ou are choosing                                   | Check one:    |  | Check one:         |   |
|     | this di<br>bankrı | strict to file for<br>uptcy                       | petition,     | e last 180 days before filing this<br>I have lived in this district longer<br>any other district.          | petition,          | e last 180 days before filing this<br>I have lived in this district longer<br>any other district. |
|     |                   |   |               | nother reason. Explain.<br>U.S.C. § 1408.)   |                    | nother reason. Explain.<br>U.S.C. § 1408.)  |
|     |                   |   |               |  |                    |   |
| Р   | art 2:            | Tell the Court                                    | About Your Ba | nkruptcy Case  |                    |   |
| 7.  |                   | napter of the<br>uptcy Code you                   |               | or a brief description of each, see N (Form 2010)). Also, go to the top o                                  |                    | 11 U.S.C. § 342(b) for Individuals Filing k the appropriate box.                                  |
|     | are ch<br>under   | oosing to file                                    | Chapter 7     |  |                    |   |
|     |                   |   | Chapter 1     | 1  |                    |   |
|     |                   |   | Chapter 1     | 2  |                    |   |
|     |                   |   | ☐ Chapter 1   | 3  |                    |   |

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| Deb | tor 1 <b>Joy</b>                                | L                                      | Neely  | Case number (if  | known)   |                          |
|-----|---|--|--|--|--|--------------------------|
|     | First Name                                      | Middle Name                            | Last Name  |  |  |                          |
| 8.  | How you will pay the fee                        | court<br>pay v                         | pay the entire fee when I file m<br>for more details about how you n<br>with cash, cashier's check, or mor<br>lf, your attorney may pay with a c                                     | nay pay. Typically, if yoney order. If your attorn                                 | ou are paying the fee yourseley is submitting your payme   | lf, you may              |
|     |   | ــــــــــــــــــــــــــــــــــــــ | d to pay the fee in installments.<br>duals to Pay Your Filing Fee in Ir  | •  | •  | lication for             |
|     |   | By la<br>than<br>fee ir                | west that my fee be waived (You<br>w, a judge may, but is not require<br>150% of the official poverty line to<br>installments). If you choose this<br>Fee Waived (Official Form 103B | d to, waive your fee, an<br>hat applies to your fami<br>s option, you must fill ou | nd may do so only if your inco<br>ily size and you are unable to<br>ut the Application to Have the | ome is less<br>o pay the |
| 9.  | Have you filed for                              | <b>⋈</b> No                            |  |  |  |                          |
|     | bankruptcy within the last 8 years?             | Yes.                                   |  |  |  |                          |
|     |   | District _                             |  | When   | Case number  |                          |
|     |   | District _                             |  | When   | Case number  |                          |
|     |   | District _                             |  | When   | Case number  |                          |
| 10. | Are any bankruptcy                              | <b>☑</b> No                            |  |  | -,   |                          |
|     | cases pending or being filed by a spouse who is | Yes.                                   |  |  |  |                          |
|     | not filing this case with you, or by a business | Debtor _                               |  | F  | Relationship to you  |                          |
|     | partner, or by an affiliate?                    | District _                             |  | When MM/D  | Case number, if known  |                          |
|     |   | Debtor _                               |  | F  | Relationship to you  |                          |
|     |   | District _                             |  |  | Case number, if known  |                          |
| 11. | Do you rent your residence?                     | ✓ No.<br>☐ Yes.                        | Go to line 12.  Has your landlord obtained an eresidence?  | eviction judgment again  | st you and do you want to st   | ay in your               |
|     |   |  |  |  | udgment Against You (Form  | ,                        |

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| Deb | tor 1   | Joy   | L          |                         | Neely   | Case number (if  | known)                         |                           |                                     |
|-----|---|---|------------|-------------------------|---|--|--------------------------------|---------------------------|-------------------------------------|
|     | -u4 O.  | First Name  | Middle N   |                         | Last Name   | - Cala Duamietan   |                                |                           |                                     |
| 128 | art 3:  | Report About A  | any Bu     | Isine                   | sses You Own as                                   | a Sole Proprietor  |                                |                           |                                     |
| 12. | -   | u a sole proprietor<br>full- or part-time<br>ss?  |            |                         | Go to Part 4.  Name and location of b             | ousiness   |                                |                           |                                     |
|     | busines   | oroprietorship is a<br>s you operate as an<br>al, and is not a                                    |            |                         | Name of business, if any                          |  |                                |                           |                                     |
|     | •   | separate legal entity such as a corporation, partnership, or LLC.                                 |            |                         | Number Street                                     |  |                                |                           |                                     |
|     | sole pro  | ave more than one oprietorship, use a e sheet and attach it                                       |            |                         | City  |  | State                          | ZIP Cod                   | le                                  |
|     | to this p   |   |            |                         | Health Care Busi                                  | e box to describe your business:<br>ness (as defined in 11 U.S.C. § 7<br>al Estate (as defined in 11 U.S.C.<br>defined in 11 U.S.C. § 101(53A))<br>er (as defined in 11 U.S.C. § 101<br>re | § 101(51B))                    |                           |                                     |
|     | Are you filing under<br>Chapter 11 of the<br>Bankruptcy Code and<br>are you a <i>small business</i>               |   | can<br>mos | set ap                  | ppropriate deadlines. If nt balance sheet, staten | the court must know whether you indicate that you are a small ment of operations, cash-flow states to exist, follow the procedure in 1   | business deb<br>tement, and fe | otor, you r<br>ederal inc | must attach your<br>come tax return |
|     | debtor?   | $\overline{\mathbf{A}}$   | No.        | I am not filing under C | hapter 11.  |  |                                |                           |                                     |
|     |   | For a definition of small business debtor, see  |            | No.                     | I am filing under Chap the Bankruptcy Code.       | ter 11, but I am NOT a small bus   | iness debtor a                 | according                 | g to the definition in              |
|     |   | C. § 101(51D).  |            | Yes.                    | I am filing under Chap<br>Bankruptcy Code.        | ter 11 and I am a small business   | debtor accord                  | ding to th                | e definition in the                 |
| Pa  | art 4:  | Report If You C   | Own o      | r Hav                   | e Any Hazardous I                                 | Property or Any Property   | That Need                      | ls Imme                   | ediate Attention                    |
| 14. | propert<br>alleged<br>immine  | own or have any ty that poses or is to pose a threat of that and identifiable to public health or |            | No<br>Yes.              | What is the hazard?                               |  |                                |                           |                                     |
|     | safety?   | Or do you own perty that needs attention?   |            |                         | If immediate attention                            | is needed, why is it needed?   |                                |                           |                                     |
|     | For example, do you own<br>perishable goods, or<br>livestock that must be fed, or<br>a building that needs urgent |   |            |                         | Where is the property                             | ?<br>Number Street   |                                |                           |                                     |
|     | repairs?  | <b>,</b>  |            |                         |   |  |                                |                           |                                     |
|     |   |   |            |                         |   | City   | S                              | tate                      | ZIP Code                            |

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Debtor 1 Neely Case number (if known) First Name Middle Name Last Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling 15. Tell the court **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: whether you You must check one: have received I received a briefing from an approved credit ☐ I received a briefing from an approved credit briefing about counseling agency within the 180 days before I counseling agency within the 180 days before I credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment Attach a copy of the certificate and the payment The law requires plan, if any, that you developed with the agency. plan, if any, that you developed with the agency. that you receive a ☐ I received a briefing from an approved credit ☐ I received a briefing from an approved credit briefing about credit counseling agency within the 180 days before I counseling agency within the 180 days before I counseling before filed this bankruptcy petition, but I do not have filed this bankruptcy petition, but I do not have you file for a certificate of completion. a certificate of completion. bankruptcy. You Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, must truthfully you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment check one of the following choices. If you cannot do so, I certify that I asked for credit counseling ☐ I certify that I asked for credit counseling you are not eligible services from an approved agency, but was services from an approved agency, but was to file. unable to obtain those services during the 7 unable to obtain those services during the 7 days after I made my request, and exigent days after I made my request, and exigent If you file anyway, circumstances merit a 30-day temporary circumstances merit a 30-day temporary the court can waiver of the requirement. waiver of the requirement. dismiss your case, To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the you will lose requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what whatever filing fee efforts you made to obtain the briefing, why you efforts you made to obtain the briefing, why you you paid, and your were unable to obtain it before you filed for were unable to obtain it before you filed for creditors can begin bankruptcy, and what exigent circumstances bankruptcy, and what exigent circumstances collection activities required you to file this case. required you to file this case. again. Your case may be dismissed if the court is Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, You must file a certificate from the approved agency. along with a copy of the payment plan you along with a copy of the payment plan you developed, if any. If you do not do so, your case developed, if any. If you do not do so, your case may be dismissed. may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. ☐ I am not required to receive a briefing about ☐ I am not required to receive a briefing about credit counseling because of: credit counseling because of: Incapacity. I have a mental illness or a mental ☐ Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. □ Disability. My physical disability causes me My physical disability causes me □ Disability. to be unable to participate in a to be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military

duty in a military combat zone.

If you believe you are not required to receive a

briefing about credit counseling, you must file a

motion for waiver of credit counseling with the court.

duty in a military combat zone.

If you believe you are not required to receive a

briefing about credit counseling, you must file a

motion for waiver of credit counseling with the court.

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| Deb | otor 1           | <b>Joy</b><br>First Name  | L<br>Middle N | ame                               | Neely<br>Last Name   |                   | Case number (if  | know  | n)   |
|-----|------------------|---|---------------|-----------------------------------|--|-------------------|--|-------|--|
| P   | art 6:           | Answer These  | Quest         | ions fo                           | or Reporting   | Purpos            | es   |       |  |
| 16. | What k<br>have?  | ind of debts do you   | 16a           | as "ir                            |  | ividual pr<br>8b. | sumer debts? Consumer de imarily for a personal, family,   |       | re defined in 11 U.S.C. § 101(8) usehold purpose."   |
|     |                  |   |               | mone                              | Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.  No. Go to line 16c.  Yes. Go to line 17. |                   |  |       |  |
|     |                  |   | 16c           | State                             | the type of debts  | s you owe         | e that are not consumer or bu  | sines | s debts.   |
| 17. | Are yo<br>Chapte | u filing under<br>er 7?   |               | No.                               | am not filing und  | der Chap          | ter 7. Go to line 18.  |       |  |
|     | any ex           | estimate that after empt property is                              |               |                                   | •  | •                 | •  | -     | xempt property is excluded and to distribute to unsecured creditors?   |
|     | admini           | excluded and administrative expenses                              |               |                                   | <b>√</b> No  |                   |  |       |  |
|     | availab          | d that funds will be<br>ble for distribution<br>ecured creditors? |               |                                   | Yes  |                   |  |       |  |
| 18. |                  | nany creditors do<br>timate that you                              |               | 1-49<br>50-99<br>100-19<br>200-99 |  |                   | 1,000-5,000<br>5,001-10,000<br>10,001-25,000   |       | 25,001-50,000<br>50,001-100,000<br>More than 100,000   |
| 19. |                  | uch do you<br>te your assets to<br>th?                            |               | \$100,0                           | ,000<br>1-\$100,000<br>01-\$500,000<br>01-\$1 million  |                   | \$1,000,001-\$10 million<br>\$10,000,001-\$50 million<br>\$50,000,001-\$100 million<br>\$100,000,001-\$500 million |       | \$500,000,001-\$1 billion<br>\$1,000,000,001-\$10 billion<br>\$10,000,000,001-\$50 billion<br>More than \$50 billion |
| 20. |                  | uch do you<br>te your liabilities to                              |               | \$100,0                           | ,000<br>1-\$100,000<br>01-\$500,000<br>01-\$1 million  |                   | \$1,000,001-\$10 million<br>\$10,000,001-\$50 million<br>\$50,000,001-\$100 million<br>\$100,000,001-\$500 million |       | \$500,000,001-\$1 billion<br>\$1,000,000,001-\$10 billion<br>\$10,000,000,001-\$50 billion<br>More than \$50 billion |

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| Debtor 1 | Joy        | L                         | Neely                           | Case number (if known)   |
|----------|------------|---------------------------|---------------------------------|--|
|          | First Name | Middle Name               | Last Name                       |  |
| Part 7:  | Sign Below |                           |                                 |  |
| For you  |            | I have exami and correct. | ned this petition, and I dec    | clare under penalty of perjury that the information provided is true   |
|          |            | or 13 of title            | •                               | , I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, understand the relief available under each chapter, and I choose to     |
|          |            |                           | · ·                             | not pay or agree to pay someone who is not an attorney to help me and read the notice required by 11 U.S.C. § 342(b).                          |
|          |            | I request relie           | ef in accordance with the c     | hapter of title 11, United States Code, specified in this petition.  |
|          |            | connection w              | •                               | concealing property, or obtaining money or property by fraud in result in fines up to \$250,000, or imprisonment for up to 20 years, and 3571. |
|          |            | X /s/ Joy L               | <b>Neely</b>                    | XSignature of Debtor 2   |
|          |            | ,                         | on 07/12/2016<br>MM / DD / YYYY | Executed on  |

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| Debtor 1   | Joy  | L                              | Neely   | Case number (if know   | wn)   |   |
|------------|--|--------------------------------|---|--|---|---|
|            | First Name   | Middle Name                    | Last Name   | · · · · · · · · · · · · · · · · · · ·                                  | , -   |   |
| represente | •  | eligibility to prelief availab | proceed under Chapter 7, ble under each chapter for | which the person is eligible. I als                                    | ates Code, and have explained the so certify that I have delivered to | ÷ |
| •          | not represented by<br>ey, you do not need<br>page. | ` '                            | , , ,   | U.S.C. § 342(b) and, in a case in an inquiry that the information in t | n which § 707(b)(4)(D) applies, he schedules filed with the petition  |   |
|            |  |                                | ert J. Adams & Associa<br>e of Attorney for Debtor  | ates Date  | e 07/12/2016<br>MM / DD / YYYY  |   |
|            |  | Robert                         | J. Adams & Associate                                | s  |   |   |
|            |  | Printed n                      | ame<br>J Adams & Associates                         | S  |   |   |
|            |  | Firm Nan                       | ne<br>Jackson Suite 202                             |  |   |   |
|            |  | Number                         | Street  |  |   | _ |
|            |  |                                |   |  |   |   |
|            |  | Chicago                        | <b>o</b>  | <u> </u>   | 60607   |   |
|            |  | City                           |   | State  | ZIP Code  |   |
|            |  | Contact p                      | ohone (312) 346-0100                                | Email address  |   |   |
|            |  | 0013056                        | 6   |  |   |   |

State

Bar number

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| Fill in this in   | formation to id  | dentify your case   | e and this filing:  |  |                                       |  |  |  |  |
|---|--|---|---|--|---------------------------------------|--|--|--|--|
| Debtor 1  | Joy  | L   | Neely   |  |                                       |  |  |  |  |
|   | First Name   | Middle Name   | Last Name   |  |                                       |  |  |  |  |
| Debtor 2<br>(Spouse, if filing                                  | g) First Name  | Middle Name   | Last Name   |  |                                       |  |  |  |  |
| United States B   | ankruptcy Court for  | the: NORTHERN   | DISTRICT OF ILLINOIS  |  |                                       |  |  |  |  |
| Case number   |  |   |   | ☐ Chock  | if this is an                         |  |  |  |  |
| (if known)  |  |   | _   | <b>—</b>   | led filing                            |  |  |  |  |
| Official Forn   | n 106A/B   |   |   |  |                                       |  |  |  |  |
|   | VB: Property   | /   |   |  | 12/15                                 |  |  |  |  |
| the asset in the of<br>filing together, b<br>sheet to this form | category where you<br>oth are equally re<br>m. On the top of a   | ou think it fits best.<br>sponsible for supply<br>ny additional pages | List an asset only once. If an ass<br>Be as complete and accurate as<br>ying correct information. If more<br>write your name and case numb<br>ing, Land, or Other Real Es   | possible. If two married pe<br>space is needed, attach a<br>per (if known). Answer eve | eople are<br>separate<br>ry question. |  |  |  |  |
| ✓ No. Go  | 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? |   |   |  |                                       |  |  |  |  |
|   | •  | •   | ll of your entries from Part 1, incl<br>rite that number here   |  | \$0.00                                |  |  |  |  |
| Part 2: Do  | escribe Your V   | ehicles   |   |  |                                       |  |  |  |  |
| -   |  | •   | in any vehicles, whether they are a, also report it on Schedule G: Exec   | _  | •                                     |  |  |  |  |
| 3. Cars, vans,  | trucks, tractors, s  | port utility vehicles   | , motorcycles   |  |                                       |  |  |  |  |
| □ No<br>▼ Yes   |  |   |   |  |                                       |  |  |  |  |
| 3.1.  |  |   | s an interest in the property?  | Do not deduct secured clai   | •                                     |  |  |  |  |
| Make:<br>Model:   | Cadillac<br>CTS  | Check or<br>✓ Debt  | ne.<br>tor 1 only   | amount of any secured claim Creditors Who Have Claim                                   |                                       |  |  |  |  |
| Year:   | 2009   | Debt  | tor 2 only  | Current value of the   | Current value of the                  |  |  |  |  |
| Approximate mile  |  | _   | tor 1 and Debtor 2 only<br>east one of the debtors and another  | entire property?   | portion you own?                      |  |  |  |  |
| Other information   |  |   | ast one of the debtors and another  | \$12,000.00  | \$12,000.00                           |  |  |  |  |
| 2009 Cadillac (   | стѕ  |   | ck if this is community property instructions)  |  |                                       |  |  |  |  |
| •   | •  | nes, ATVs and othe  | er recreational vehicles, other vehicles, in some services of the recommendation of the |  |                                       |  |  |  |  |
| ✓ No ☐ Yes  | ,  | -, p  | ,   |  |                                       |  |  |  |  |
|   | -  | -   | ll of your entries from Part 2, incl  | - ·  | \$12,000.00                           |  |  |  |  |

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| Deb         | tor 1              | Joy<br>First Name                | L<br>Middle Name      | <b>Neely</b> Last Name   | Case number (if known)  |  |
|-------------|--------------------|----------------------------------|-----------------------|--|---|--|
| P           | art 3:             | Describe `                       | Your Personal         | and Household Items  |   |  |
| Do <u>y</u> | you own            | or have any le                   | egal or equitable i   | nterest in any of the followin   | g items?  | Current value of the portion you own?  Do not deduct secured claims or exemptions. |
| 6.          |                    | old goods and<br>es: Major appli |                       | nens, china, kitchenware   |   |  |
|             | ш                  | . Describe                       | used furniture,       | 3 BR   |   | \$300.00   |
| 7.          | Electro<br>Example | es: Televisions                  |                       |  | ipment; computers, printers, scanners;<br>cameras, media players, games |  |
|             | ✓ No<br>☐ Yes      | . Describe                       |                       |  |   |  |
| 8.          |                    | •                                | •                     | ngs, prints, or other artwork; bo<br>collections; other collections, i | ooks, pictures, or other art objects;<br>memorabilia, collectibles      |  |
|             | ✓ No<br>☐ Yes      | . Describe                       |                       |  |   |  |
| 9.          |                    |                                  | otographic, exercise  | e, and other hobby equipment;<br>tools; musical instruments            | bicycles, pool tables, golf clubs, skis;                                |  |
|             | ✓ No<br>☐ Yes      | . Describe                       |                       |  |   |  |
| 10.         | Firearm<br>Example |                                  | es, shotguns, amm     | unition, and related equipmen  | t   |  |
|             | ✓ No               | . Describe                       | , <b>.</b>            | ,  |   |  |
| 11.         | Clothes<br>Example |                                  | lothes, furs, leathe  | r coats, designer wear, shoes,   | accessories   |  |
|             | □ No ✓ Yes         | . Describe                       | clothing              |  |   | \$250.00   |
| 12.         | Jewelry<br>Example |                                  | ewelry, costume jev   | welry, engagement rings, wedo  | ling rings, heirloom jewelry, watches, gems,                            |  |
|             | ✓ No<br>☐ Yes      | . Describe                       |                       |  |   |  |
| 13.         |                    | m animals<br>es: Dogs, cats,     | birds, horses         |  |   |  |
|             | ✓ No<br>☐ Yes      | . Describe                       |                       |  |   |  |
| 14.         | Any oth            | -                                | nd household iten     | ns you did not already list, in  | cluding any health aids you   |  |
|             | _                  | . Give specific rmation          |                       |  |   |  |
| 15.         |                    |                                  | of all of your entrie | es from Part 3, including any  | entries for pages you have  | \$550.00   |

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| Deb | tor 1             | Joy<br>First Name                                     | <b>L</b><br>Middle Name   | Neely<br>Last Name           | Case number (if known)   |   |
|-----|-------------------|---|---|------------------------------|--|---|
| P   | art 4:            |   | Your Financial As   |                              |  |   |
|     |                   |   |   | est in any of the followin   | g?   | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. | Cash<br>Exampl    | es: Money you petition                                | have in your wallet, in   | your home, in a safe depo    | sit box, and on hand when you file your  |   |
|     | □ No ✓ Yes        | S   |   |                              | Cash:  | \$150.00  |
| 17. | -                 | _   | houses, and other simi  |                              | of deposit; shares in credit unions, e multiple accounts with the same               |   |
|     | □ No ✓ Yes        | 3   | Institut  | ion name:                    |  |   |
|     | 17                | .1. Checking  | account: Check  | king and savings acco        | unts   | \$150.00  |
| 18. | Exampl<br>✓ No    | es: Bond funds  | or publicly traded sto<br>s, investment accounts<br>Institution or issu | with brokerage firms, mon    | ey market accounts   |   |
| 19. | Non-pu            | blicly traded s                                       |   | incorporated and uninco      | rporated businesses, including   |   |
|     | ✓ No ☐ Yes        | s. Give specificomation about                         |   | Volitare                     | % of ownership:  |   |
| 20. | Negotia           | ble instruments                                       | include personal chec   |                              | gotiable instruments nissory notes, and money orders. ny signing or delivering them. |   |
|     | info              | s. Give specific<br>ormation about<br>m               |   |                              |  |   |
| 21. |                   | nent or pension<br>les: Interests in<br>profit-sharin | IRA, ERISA, Keogh, 4  | 01(k), 403(b), thrift saving | s accounts, or other pension or  |   |
|     |                   | s. List each<br>count separately                      | v. Type of account:   | Institution name:            |  |   |
| 22. | Your sh<br>Exampl |   | ed deposits you have n  |                              | nue service or use from a company<br>etric, gas, water), telecommunications          |   |
|     | ✓ No              | <b>3</b>  |   | Institution name or indivi   | dual:  |   |
| 23. | Annuiti No        | es (A contract  |   | payment of money to you,     | either for life or for a number of years)  |   |
| 24. | Interes           | ts in an educat                                       |   | nt in a qualified ABLE pro   | gram, or under a qualified state tuition   | program.  |
|     | <b>☑</b> No       | ,,,,  |   |                              | ly file the records of any interests. 11 U.S   | .C. § 521(c)  |

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| Deb | tor 1         | Joy  | L                                      | Neely   | Case number (if known  | own)           |   |
|-----|---------------|--|--|---|--|----------------|---|
|     |               | First Name   | Middle Name                            | Last Name   |  |                |   |
| 25. | powers        | equitable or future services exercisable for y               | •                                      | operty (other than anyth                            | ning listed in line 1), and rights or                          | •              |   |
|     |               | s. Give specific ormation about the                          | m                                      |   |  |                |   |
| 26. |               |  |  | ecrets, and other intelleds, proceeds from royaltie | ctual property;<br>s and licensing agreements                  |                |   |
|     |               | s. Give specific promation about the                         | m                                      |   |  |                |   |
| 27. |               | es, franchises, ar   |  | ntangibles  |  |                |   |
|     | ✓ No          | s. Give specific   |  | ses, cooperative associa                            | ation holdings, liquor licenses, profe                         | essional licen | ses   |
|     |               | ormation about the   |  |   |  |                |   |
| Mor | ney or pi     | roperty owed to y  | ou?                                    |   |  |                | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax ref       | unds owed to yo  | u                                      |   |  |                |   |
|     | <b>☑</b> No   |  |  |   |  |                | 40.00   |
|     |               | <ol> <li>Give specific in<br/>out them, including</li> </ol> |  |   |  | Federal        |   |
|     | you           | ı already filed the i  | returns                                |   |  | State:         | \$0.00  |
|     | and           | the tax years  | •••••                                  |   |  | Local:         | \$0.00  |
| 29. | •             | support  |  |   |  |                |   |
|     |               | les: Past due or lu  | ımp sum alimony,                       | spousal support, child su                           | pport, maintenance, divorce settlen                            | nent, property | y settlement  |
|     | ✓ No          | s. Give specific in  | formation                              |   | Alimor   | ny:            | \$0.00  |
|     | _             |  |  |   | Mainte   | enance:        | \$0.00  |
|     |               |  |  |   | Suppo  | ort:           | \$0.00  |
|     |               |  |  |   | Divorc   | e settlement:  | \$0.00  |
|     |               |  |  |   | Proper   | rty settlemen  | t: <b>\$0.00</b>  |
| 30. |               |  | s, disability insurar                  | nce payments, disability benefits; unpaid loans you | enefits, sick pay, vacation pay, wor<br>u made to someone else | rkers'         |   |
|     | ✓ No<br>☐ Yes | s. Give specific in  | formation                              |   |  |                |   |
| 31. |               | ts in insurance poles: Health, disabi                        |  | ce; health savings accou                            | nt (HSA); credit, homeowner's, or re                           | enter's insura | nce   |
|     | ☑ No          | N. a. i  |  |   |  |                |   |
|     | cor           | s. Name the insur-<br>npany of each poli<br>d list its value | су                                     | name:   | Beneficiary:   | Su             | irrender or refund value:   |
| 32. | Any int       | erest in property  | that is due you for a living trust, ex | rom someone who has a pect proceeds from a life     |  |                |   |
|     | ✓ No<br>☐ Yes | s. Give specific in  | formation                              |   |  |                |   |

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| Deb |                | oy<br>irst Name   | L<br>Middle Name  | Neely<br>Last Name         | Case number (if known)                  |   |
|-----|----------------|---|-------------------|----------------------------|---|---|
| 33. | Claims a       | gainst third parties  | s, whether or no  |                            | it or made a demand for payment         |   |
|     | ✓ No           |   |                   | insurance claims, or right | s to sue                                |   |
|     | _              | Describe each clai  |                   |                            |   |   |
| 34. |                | ntingent and unliq<br>set off claims                            | uidated claims    | of every nature, includin  | g counterclaims of the debtor and       |   |
|     | ✓ No<br>☐ Yes. | Describe each clai  | m                 |                            |   |   |
| 35. | Any finar      | ncial assets you di   | id not already li | st                         |   |   |
|     | ✓ No<br>☐ Yes. | Give specific inform  | mation            |                            |   |   |
| 36. |                |   |                   |                            | y entries for pages you have            | \$300.00  |
| Pa  | art 5: D       | escribe Any Bı  | usiness-Rela      | ted Property You Ov        | vn or Have an Interest In. List any     | real estate in Part 1.  |
|     |                | -   |                   | interest in any business   | -                                       |   |
|     | •              | Go to Part 6.   | <b>9</b>          | ,                          | property.                               |   |
|     |                | Go to line 38.  |                   |                            |   |   |
|     |                |   |                   |                            |   | Current value of the portion you own?  Do not deduct secured claims or exemptions |
| 38. | Accounts       | s receivable or cor   | nmissions you     | already earned             |   | claims or exemptions.   |
|     | ✓ No<br>☐ Yes. | Describe  |                   |                            |   |   |
| 39. | -              | uipment, furnishir<br>s: Business-related<br>desks, chairs, ele | computers, soft   |                            | opiers, fax machines, rugs, telephones, |   |
|     | ✓ No<br>☐ Yes. | Describe  |                   |                            |   |   |
| 40. | Machine        | ry, fixtures, equipr  | ment, supplies y  | ou use in business, and    | tools of your trade                     |   |
|     | ✓ No ✓ Yes.    | Describe  |                   |                            |   |   |
| 41. | Inventory      | 1   |                   |                            |   |   |
|     | ✓ No<br>☐ Yes. | Describe  |                   |                            |   |   |
| 42. | Interests      | in partnerships or  | r joint ventures  |                            |   |   |
|     | ✓ No<br>☐ Yes. | Describe Name   | e of entity:      |                            | % of ownership:                         |   |
| 43. | Custome        | r lists, mailing list   | s, or other com   | pilations                  |   |   |
|     | ✓ No<br>☐ Yes. | Do your lists inclu  ☐ No ☐ Yes. Describe                       |                   | identifiable information(  | as defined in 11 U.S.C. § 101(41A))?    |   |

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| Deb | tor 1         | Joy<br>First Name                       | L<br>Middle Name    | Neely<br>Last Name    | Case number (if known)                        |   |
|-----|---------------|---|---------------------|-----------------------|---|---|
| 44. | Any bu        | siness-related prop                     | erty you did not a  | Iready list           |   |   |
|     | ✓ No          | s. Give specific infor                  | mation.             |                       |   |   |
| 45. |               |   |                     |                       | any entries for pages you have                | \$0.00  |
| Pa  |               | Describe Any Fa<br>If you own or hav    |                     |                       | Related Property You Own or Have a<br>Part 1. | n Interest In.  |
| 46. | Do you        | own or have any le                      | gal or equitable ir | nterest in any farm-  | or commercial fishing-related property?       |   |
|     |               | Go to Part 7.  S. Go to line 47.        |                     |                       |   |   |
|     |               |   |                     |                       |   | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 47. | Farm a        | <b>nimals</b><br>/es: Livestock, poultr | y, farm-raised fish |                       |   |   |
|     | ✓ No<br>☐ Yes | S                                       |                     |                       |   |   |
| 48. | Crops-        | -either growing or h                    | arvested            |                       |   |   |
|     |               | s. Give specific                        |                     |                       |   |   |
| 49. | Farm a        | nd fishing equipme                      | nt, implements, m   | achinery, fixtures, a | and tools of trade                            |   |
|     | ✓ No<br>☐ Yes | <b>5</b>                                |                     |                       |   |   |
| 50. | Farm a        | nd fishing supplies,                    | chemicals, and fe   | eed                   |   |   |
|     | ✓ No<br>☐ Yes | S                                       |                     |                       |   |   |
| 51. | Any far       | m- and commercial                       | fishing-related pr  | operty you did not    | already list                                  |   |
|     |               | s. Give specific                        |                     |                       |   |   |
| 52. |               |   |                     |                       | any entries for pages you have                | \$0.00  |
| Pa  | art 7:        | Describe All Pro                        | perty You Ow        | n or Have an Int      | erest in That You Did Not List Above          |   |
| 53. | •             | have other property                     |                     | •                     |   |   |
|     | ✓ No          | s. Give specific infor                  | mation.             |                       |   |   |
| 54. | Add the       | e dollar value of all                   | of your entries fro | m Part 7. Write tha   | t number here                                 | \$0.00  |

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| Debtor 1   | Joy                 | L                         | Neely               | Case nu     | umber (if known)             |                |             |
|------------|---------------------|---------------------------|---------------------|-------------|------------------------------|----------------|-------------|
|            | First Name          | Middle Name               | Last Name           |             |                              |                |             |
| Part 8:    | List the Tota       | als of Each Part of       | this Form           |             |                              |                |             |
| 55. Part 1 | l: Total real estat | e, line 2                 |                     |             |                              | <b>&gt;</b> _  | \$0.00      |
| 56. Part 2 | 2: Total vehicles,  | line 5                    |                     | \$12,000.00 |                              |                |             |
| 57. Part 3 | 3: Total personal   | and household items,      | line 15             | \$550.00    |                              |                |             |
| 58. Part 4 | 1: Total financial  | assets, line 36           |                     | \$300.00    |                              |                |             |
| 59. Part 5 | 5: Total business   | -related property, line   | 45                  | \$0.00      |                              |                |             |
| 60. Part 6 | 6: Total farm- and  | I fishing-related prope   | rty, line 52        | \$0.00      |                              |                |             |
| 61. Part 7 | 7: Total other pro  | perty not listed, line 54 |                     | ÷ \$0.00    |                              |                |             |
| 62. Total  | personal proper     | ty. Add lines 56 through  | gh 61               | \$12,850.00 | Copy personal property total | <b>&gt;</b> +_ | \$12,850.00 |
| 63. Total  | of all property or  | n Schedule A/B. Add       | I line 55 + line 62 |             |                              |                | \$12,850.00 |

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| Fill in this inf   | formation to i   | dentify your o   | case:   |                                 |   |                                |   |           |
|--|--|--|---|---------------------------------|---|--------------------------------|---|-----------|
| Debtor 1   | Joy  | L  | Neely   |                                 |   |                                |   |           |
| Debtor 2   | First Name   | Middle Name  | Last Name   |                                 |   |                                |   |           |
| (Spouse, if filing)  | First Name   | Middle Name  | e Last Name   |                                 |   |                                |   |           |
| United States Ba   | nkruptcy Court for   | r the: NORTHE  | RN DISTRICT OF  | LLIN                            | IOIS  |                                | ☐ Check if this is an   |           |
| Case number  |  |  |   |                                 |   |                                | amended filing  |           |
| (if known)   |  |  |   |                                 |   |                                |   |           |
| Official Form  |  | way Vou Cl   | oim oo Evomi  | -1                              |   |                                |   | 04/40     |
| Schedule C   | : The Prope  | erty You Ci  | aim as Exem <sub>l</sub>  | στ                              |   |                                |   | 04/16     |
| Using the property   | you listed on <i>Sch</i><br>ill out and attach t   | nedule A/B: Properson this page as m   | erty (Official Form 10  | 6A/B                            | as your source  | e, list the                    | esponsible for supplying correct info<br>e property that you claim as exempt<br>ssary. On the top of any additional   | . If more |
| is to state a speci<br>exempted up to the<br>receive certain be<br>exemption of 100°<br>property is determ | ific dollar amoun<br>he amount of any<br>enefits, and tax-e<br>% of fair market<br>mined to exceed | t as exempt. All<br>applicable stat<br>xempt retirement<br>value under a la<br>that amount, yo | ternatively, you may<br>utory limit. Some ex<br>nt fundsmay be un | claii<br>kemp<br>limite<br>mpti | m the full fair r<br>tionssuch as<br>ed in dollar am<br>on to a particu | narket v<br>those f<br>ount. H | rou claim. One way of doing so value of the property being for health aids, rights to lowever, if you claim an ar amount and the value of the e statutory amount. |           |
| 1 Which got of   | evemptions are   | vou eleiming?  | Chook one only  | ovon                            | if your analyse   | io filina                      | with you  |           |
|  | exemptions are   |  | Check one only, kruptcy exemptions.                               |                                 |   | ŭ                              | with you.   |           |
| <u>اسنا</u>  | claiming state and   |  |   | 110                             | .0.0. 8 022(b)(0  | <i>J</i> )                     |   |           |
| 2. For any prop  | erty you list on S   | S <i>chedule A/B</i> th  | at you claim as exe   | npt. i                          | fill in the inforr  | nation b                       | pelow.  |           |
| Brief description  |  |  | Current value of  | •                               | ount of the   |                                | Specific laws that allow exempt   | ion       |
| Schedule A/B that  |  |  | the portion you own   |                                 | mption you cla  | aim                            | Specific laws that allow exempt   | lion      |
|  |  |  | Copy the value from Schedule A/B                                  |                                 | eck only one bo<br>h exemption  | x for                          |   |           |
| Brief description:   |  |  | \$12,000.00   | $\overline{\mathbf{Q}}$         | \$0.00  |                                | 735 ILCS 5/12-1001(c)   |           |
| 2009 Cadillac C  | TS   |  |   |                                 | 100% of fair n  |                                | ( )   |           |
| Line from Schedule   | le A/B: 3.1  |  |   |                                 | value, up to a applicable sta limit                                     | •                              |   |           |
| Brief description:   |  |  | \$300.00  | <u> </u>                        | \$300.00  | 0                              | 735 ILCS 5/12-1001(b)   |           |
| used furniture, 3  |  |  |   |                                 | 100% of fair n<br>value, up to a<br>applicable sta<br>limit             | ny                             |   |           |
| (Subject to ac   | djustment on 4/01/   | /19 and every 3 y  | more than \$160,375 years after that for cas                      | ses fi                          |   |                                | ,   |           |

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| Debtor 1                                | Joy                                       | L                             | Neely                                | Case no  | umber (if known)                     |
|---|---|-------------------------------|--------------------------------------|--|--------------------------------------|
| Part 2:                                 | First Name  Additional                    | Middle Name Page              | Last Name                            |  |                                      |
|   | ription of the pro<br>A/B that lists this | perty and line on<br>property | Current value of the portion you own | Amount of the exemption you clair                                | Specific laws that allow exemption n |
|   |   |                               | Copy the value from Schedule A/B     | Check only one box a each exemption                              | for                                  |
| Brief descri<br>clothing<br>Line from S | iption:<br>Schedule A/B:                  | <u>11</u>                     | \$250.00                             | \$250.00 100% of fair ma value, up to any applicable statu limit |                                      |
| Brief descri                            |   | 16                            | \$150.00                             | \$150.00<br>100% of fair ma<br>value, up to any                  |                                      |
|   |   | <u></u>                       |                                      | applicable statu<br>limit  | tory                                 |
| _                                       | iption:    and savings a                  |                               | \$150.00                             | \$150.00<br>100% of fair ma<br>value, up to any                  |                                      |
| Line nom e                              | oneddio A/D                               |                               |                                      | applicable statu<br>limit  | tory                                 |

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| Fill in this inf   |  | entify your case:  | Neely  |  |   |                                   |
|--|--|--|--|--|---|-----------------------------------|
| Debior   | Joy<br>First Name  | Middle Name  | Last Name  |  |   |                                   |
| Debtor 2<br>(Spouse, if filing)  | First Name   | Middle Name  | Last Name  |  |   |                                   |
|  |  | ne: <b>NORTHERN DI</b>   | STRICT OF ILLIN  | ois  |   |                                   |
| Case number  | , ,  |  |  |  |   |                                   |
| (if known)   | -  |  |  |  | Check if this is amended filing   |                                   |
| Official Form  | 106D   |  |  |  |   |                                   |
| Schedule D:  | Creditors W  | /ho Have Clai  | ms Secured   | by Property  |   | 12/15                             |
| correct informatio On the top of any  1. Do any credit  No. Che  | on. If more space is<br>additional pages, v<br>tors have claims se         | s needed, copy the write your name and ecured by your proper mit this form to the co                   | Additional Page, fill<br>case number (if kn  | it out, number the ent<br>own).                                | ally responsible for sup ries, and attach it to thi thing else to report on the | s form.                           |
| Part 1: Lis  | t All Secured C  | laims  |  |  |   |                                   |
| claim, list the creditor has a   | creditor separately f<br>particular claim, list<br>ible, list the claims i | ditor has more than or<br>for each claim. If more<br>the other creditors in<br>in alphabetical order a | re than one<br>Part 2. As  | Column A Amount of claim Do not deduct the value of collateral | Column B Value of collateral that supports this claim                           | Column C Unsecured portion If any |
| 2.1  |  | Describe the secures the c   |  | \$18,603.00  | \$12,000.00   | \$6,603.00                        |
| Regional Accept  | tance Corp   | 2009 Cadilla   | c CTS  |  |   |                                   |
| Creditor's name  1420A E Firetow  Number Street  | /er  |  |  |  |   |                                   |
| Greenville  City  Who owes the det  Debtor 1 only  Debtor 2 only  Debtor 1 and D  At least one of  Check if this of to a community | Debtor 2 only<br>the debtors and and                                       | Contingen Unliquidat Disputed Nature of lien An agreen Statutory I Judgment                            | t ed . Check all that app nent you made (such ien (such as tax lien, lien from a lawsuit luding a right to offse | as mortgage or secure<br>mechanic's lien)                      |   |                                   |
| Date debt was inc  | •  | Last 4 digits o  | of account number  |  |   |                                   |
|  |  |  |  |  |   |                                   |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$18,603.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$18,603.00

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| Fill in this inf                | ormation to iden       | tify your case:  |                    |                                    |
|---------------------------------|------------------------|------------------|--------------------|------------------------------------|
| Debtor 1                        | Joy<br>First Name      | L<br>Middle Name | Neely<br>Last Name |                                    |
| Debtor 2<br>(Spouse, if filing) | First Name             | Middle Name      | Last Name          |                                    |
| United States Bar               | nkruptcy Court for the | NORTHERN DIST    | RICT OF ILLINOIS   |                                    |
| Case number (if known)          |                        |                  |                    | Check if this is an amended filing |

#### Official Form 106E/F

#### Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List All of Your PRIORITY Unsecured Claims

| 1. | Do any creditors | have priority | unsecured of | claims against yo | u? |
|----|------------------|---------------|--------------|-------------------|----|
|----|------------------|---------------|--------------|-------------------|----|

No. Go to Part 2.

☐ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.

Total claim Priority Nonpriority amount amount

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| Debtor 1           | Joy                            | <u>L</u>                    | Neely                      | Case number (if known)   |                 |
|--------------------|--------------------------------|-----------------------------|----------------------------|--|-----------------|
|                    | First Name                     | Middle Name                 | Last Name                  |  |                 |
|                    |                                |                             |                            |  |                 |
| Part 2:            | List All of                    | Your NONPRIORI              | TY Unsecured Clai          | ns   |                 |
| 3. Do ar           | ny creditors have              | e nonpriority unsecured     | d claims against you?      |  |                 |
|                    |                                |                             |                            | e court with you other schedules.  |                 |
| ш.                 | Yes                            | uning to report in this par | a. Cubiliti uno form to un | 5 GOULT WITH YOU OTHER SCHOOLINGS.   |                 |
|                    |                                |                             |                            |  |                 |
|                    |                                | •                           | •                          | der of the creditor who holds each claim.  ditor separately for each claim. For each claim liste | d identify what |
|                    |                                |                             |                            | than one creditor holds a particular claim, list the of  | •               |
| Part 3             | 3. If more space i             | s needed for nonpriority    | unsecured claims, fill ou  | ut the Continuation Page of Part 2.  |                 |
|                    |                                |                             |                            |  |                 |
|                    |                                |                             |                            |  | Total claim     |
| 4.1                |                                |                             |                            |  | \$512.00        |
|                    | Callers, Inc.                  |                             | Last 4 digits of acco      | ount number  | \$512.00        |
| Nonpriority C      | Creditor's Name                |                             | When was the debt          |  |                 |
| 501 Gree<br>Number | ne Street Street               |                             |                            | ile, the claim is: Check all that apply.   |                 |
|                    | , Suite 302                    |                             | _                          | ne, the claim is. Oncor an that apply.   |                 |
|                    |                                |                             | Unliquidated               |  |                 |
| Augusta            |                                | GA 30901                    | Disputed                   |  |                 |
| City               |                                | State ZIP Code              | Type of NONPRIOR           | ITY unsecured claim:   |                 |
|                    | red the debt?                  | Check one.                  | Student loans              |  |                 |
|                    | r 1 only                       |                             |                            | ng out of a separation agreement or divorce  |                 |
| ш                  | r 2 only<br>r 1 and Debtor 2 o | only                        | •                          | report as priority claims  |                 |
| _                  | st one of the debt             | •                           |                            | or profit-sharing plans, and other similar debts   |                 |
| ☐ Check            | if this claim is f             | or a community debt         | Collecting for             | -Peoples gas   |                 |
| Is the clair       | m subject to offs              | set?                        |                            | 3.00 July  |                 |
| <b>☑</b> No        |                                |                             |                            |  |                 |
| ☐ Yes              |                                |                             |                            |  |                 |
| 4.2                |                                |                             |                            |  | \$6,000.00      |
|                    | ent of ed/Navie                | nnt                         | Last 4 digits of acco      | ount number  | <del></del>     |
| Nonpriority C      | Creditor's Name                | FIIL                        | When was the debt          | <del></del>  |                 |
| P.O.Box 9          | 9635<br>Street                 |                             | _                          | ile, the claim is: Check all that apply.   |                 |
| Number             | Sileet                         |                             | Contingent                 | ne, the claim is. Oncor an that apply.   |                 |
|                    |                                |                             | Unliquidated               |  |                 |
| Wilkes B           | arre                           | PA 18773                    | Disputed                   |  |                 |
| City               | unc                            | State ZIP Code              | Type of NONPRIOR           | ITY unsecured claim:   |                 |
|                    | red the debt?                  | Check one.                  | ☐ Student loans            |  |                 |
|                    | r 1 only<br>r 2 only           |                             |                            | ng out of a separation agreement or divorce  |                 |
|                    | r 1 and Debtor 2 o             | only                        |                            | report as priority claims  |                 |
| _                  | st one of the debt             |                             | <b>=</b>                   | or profit-sharing plans, and other similar debts   |                 |
| Check              | if this claim is f             | or a community debt         | Student loan               |  |                 |
| _                  | m subject to offs              |                             |                            |  |                 |
| <b>☑</b> No        | •                              |                             |                            |  |                 |
| Yes                |                                |                             |                            |  |                 |

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| Debtor 1         | Joy                                 | L                       | Neely                       | Case number (if known)  |             |
|------------------|-------------------------------------|-------------------------|-----------------------------|---|-------------|
|                  | First Name                          | Middle Name             | Last Name                   |   |             |
| Part 2:          | Your NONPE                          | RIORITY Unsec           | ured Claims Conti           | nuation Page  |             |
|                  |                                     |                         |                             |   |             |
| previous         | • •                                 | is page, number th      | em sequentially from the    |   | Total claim |
|                  | page.                               |                         |                             |   |             |
| 4.3              |                                     |                         |                             |   | \$693.00    |
| Escallate        | e Inc<br>Creditor's Name            |                         | Last 4 digits of acco       | unt number  |             |
|                  | neham RD Ste 20                     | 0                       | When was the debt i         | ncurred?  |             |
| Number           | Street                              |                         | As of the date you fi       | le, the claim is: Check all that apply.                             |             |
|                  |                                     |                         | Contingent                  |   |             |
|                  |                                     |                         | Unliquidated Disputed       |   |             |
| Canton           | OH                                  |                         |                             |   |             |
| City<br>Who incu | Sta<br>rred the debt? Ch            | te ZIP Code<br>eck one. | Type of NONPRIORI           | TY unsecured claim:   |             |
|                  | r 1 only                            | COR ONC.                | Student loans               |   |             |
|                  | r 2 only                            |                         |                             | g out of a separation agreement or divorce eport as priority claims |             |
| ш                | r 1 and Debtor 2 only               |                         | •                           | or profit-sharing plans, and other similar debts                    |             |
| ☐ At leas        | st one of the debtors               | and another             | Other. Specify              |   |             |
| ☐ Checl          | k if this claim is for a            | a community debt        | Medical-Emp o               | f Chicago   |             |
|                  | im subject to offset?               | •                       |                             |   |             |
| ✓ No<br>□ Yes    |                                     |                         |                             |   |             |
|                  |                                     |                         |                             |   |             |
| 4.4              |                                     |                         |                             |   | \$1,000.00  |
| PLS              |                                     |                         | Last 4 digits of acco       | unt number  |             |
|                  | Creditor's Name                     |                         | When was the debt i         | ncurred?  |             |
| Number           | st 87th Street Street               |                         | As of the date you fi       | le, the claim is: Check all that apply.                             |             |
|                  | Olloot                              |                         | Contingent                  | o, and orann ion of one an anat apply.                              |             |
|                  |                                     |                         | Unliquidated                |   |             |
| Chicago          | IL                                  | 60619                   | Disputed                    |   |             |
| City             | Sta                                 |                         | Type of NONPRIORI           | TY unsecured claim:   |             |
|                  |                                     | eck one.                | ☐ Student loans             |   |             |
| سنا              | or 1 only                           |                         | Obligations arisin          | g out of a separation agreement or divorce                          |             |
|                  | or 2 only<br>or 1 and Debtor 2 only |                         | •                           | eport as priority claims  |             |
|                  | st one of the debtors               |                         | <b>—</b>                    | or profit-sharing plans, and other similar debts                    |             |
| ш                | k if this claim is for a            |                         | Other. Specify  Payday loan |   |             |
| ш                | m subject to offset?                | -                       | i ayaay loali               |   |             |
| ✓ No             | ,                                   |                         |                             |   |             |
| Yes              |                                     |                         |                             |   |             |

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| Debtor 1 | <b>Joy</b><br>First Name | L<br>Middle Name | <b>Neely</b><br>Last Name                                 | Case number (if known)                        |
|----------|--------------------------|------------------|---|---|
| Part 4:  | Add the Amo              | ounts for Each 1 | Type of Unsecured Clain                                   | n   |
|          |                          | • •              | ured claims. This information<br>type of unsecured claim. | n is for statistical reporting purposes only. |
|          |                          |                  |   | Total claim                                   |

|                          |     |   |                         | Total claim |
|--------------------------|-----|---|-------------------------|-------------|
| Total claims from Part 1 | 6a. | Domestic support obligations  | 6a.                     | \$0.00      |
| nomi art i               | 6b. | Taxes and certain other debts you owe the government  | 6b.                     | \$0.00      |
|                          | 6c. | Claims for death or personal injury while you were intoxicated  | 6c.                     | \$0.00      |
|                          | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. <b>-</b>            | \$0.00      |
|                          | 6e. | <b>Total.</b> Add lines 6a through 6d.  | 6d.                     | \$0.00      |
|                          |     |   |                         | Total claim |
| Total claims from Part 2 | 6f. | Student loans   | 6f.                     | \$0.00      |
|                          | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g.                     | \$0.00      |
|                          | 6h. | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h.                     | \$0.00      |
|                          | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | <sup>6i.</sup> <b>-</b> | \$8,205.00  |
|                          | 6j. | <b>Total.</b> Add lines 6f through 6i.  | 6j.                     | \$8,205.00  |

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| Fill in this information to identify your case: |   |                  |                    |  |                                    |  |  |  |
|---|---|------------------|--------------------|--|------------------------------------|--|--|--|
| Debtor 1  | <b>Joy</b><br>First Name  | L<br>Middle Name | Neely<br>Last Name |  |                                    |  |  |  |
| Debtor 2<br>(Spouse, if filing)                 | First Name  | Middle Name      | Last Name          |  |                                    |  |  |  |
| United States Ba                                | United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS |                  |                    |  |                                    |  |  |  |
| Case number (if known)                          |   |                  |                    |  | Check if this is an amended filing |  |  |  |

### Official Form 106G

#### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

    Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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|                            |  |                         |  | _  |    |
|----------------------------|--|-------------------------|--|--|----|
| Fill in this in            | formation to i   | identify your case      | :  |  |    |
| Debtor 1                   | Joy  | L                       | Neely  |  |    |
|                            | First Name   | Middle Name             | Last Name  |  |    |
| Debtor 2                   | , =  |                         |  |  |    |
| (Spouse, if filing         | g) First Name  | Middle Name             | Last Name  |  |    |
| United States B            | ankruptcy Court fo   | or the: NORTHERN D      | ISTRICT OF ILLINOIS  |  |    |
| Case number                |  |                         |  |  |    |
| (if known)                 |  |                         |  | Check if this is an amended filing   |    |
|                            |  |                         |  |  |    |
| Official Form              | n 106⊔   |                         |  |  |    |
| Official Forn              |  |                         |  |  |    |
| Schedule F                 | l: Your Cod  | ebtors                  |  |  | 12 |
| page. On the top           | _  | al Pages, write your n  |  | the left. Attach the Additional Page to this wn). Answer every question.  se as a codebtor.)   |    |
| include Arizo              | ona, California, Ida<br>o to line 3.<br>id your spouse, fo | aho, Louisiana, Nevada  |  | y? (Community property states and territories kas, Washington, and Wisconsin.) ne?   |    |
| 3. In Column 1 person show | wn in line 2 again<br>Schedule D (Offic                    | n as a codebtor only if | that person is a guarantor or edule E/F (Official Form 106E/ | for if your spouse is filing with you. List the cosigner. Make sure you have listed the F), or <i>Schedule G</i> (Official Form 106G). Use |    |

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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| G                 | ill in this inform  | ation to identi  | y your case:  |   |                   |                     |                           |  |
|-------------------|---|--|---|---|-------------------|---------------------|---------------------------|--|
|                   | Debtor 1  | Joy  | L   | Neely   |                   |                     |                           |  |
|                   |   | First Name   | Middle Name   | Last Name   |                   |                     | Che                       | ck if this is:   |
|                   | Debtor 2<br>(Spouse, if filing)   | First Name   | Middle Name   | Last Name   |                   |                     | _  _                      | An amended filing  |
|                   |   |  |   | DISTRICT OF IL  | LINO              | ıc                  |                           | A supplement showing postpetition  |
|                   | United States Bankru Case number  | uptcy Court for the:                                       | NORTHERN  | DISTRICT OF IL  | LINO              | 13                  | - -                       | chapter 13 income as of the following date:  |
|                   | (if known)  |  |   |   | _                 |                     |                           | MM / DD / YYYY   |
| 0                 | fficial Form 10   | <u>61</u>  |   |   |                   |                     |                           |  |
| S                 | chedule I: You  | ur Income  |   |   |                   |                     |                           | 12/15  |
| res<br>ind<br>abo | sponsible for supply<br>clude information ab<br>out your spouse. If<br>ur name and case n | ing correct inforn<br>out your spouse.<br>more space is ne | nation. If you are<br>If you are separ<br>eded, attach a se<br>Answer every c | e married and not<br>ated and your spo<br>eparate sheet to th | filing<br>ouse is | jointly<br>s not fi | , and your<br>ling with y | I Debtor 2), both are equally<br>spouse is living with you,<br>ou, do not include information<br>any additional pages, write |
| 1.                | Fill in your employ   | yment  |   | Dobtor 1  |                   |                     |                           | Debter 2 or non filing enouge  |
|                   | If you have more th   |  |   | Debtor 1  |                   |                     |                           | Debtor 2 or non-filing spouse  |
|                   | job, attach a separa<br>with information ab   |  | oyment status   | <ul><li>✓ Employed</li><li>✓ Not employed</li></ul>           | nd.               |                     |                           | <ul><li>☐ Employed</li><li>☐ Not employed</li></ul>  |
|                   | additional employe  | rs.  |   |   |                   | -44                 |                           | Not employed   |
|                   | Include part-time, s  |  | pation  | Administrative  | ASS               | Stant               |                           | _  |
|                   | or self-employed w  | ·  | oyer's name   | PMR Illinois H  | oldin             | g LLC               |                           |  |
|                   | Occupation may in student or homema applies.  | -iiibi   | oyer's address  | 1395 NW 167tl<br>Number Street                                | n St              |                     |                           | Number Street  |
|                   |   |  |   | Miami City  |                   | FL<br>State         | <b>33169</b> Zip Code     | City State Zip Code  |
|                   |   | How  | ong employed ti   | •   |                   |                     | _p                        | ου, ουν Ξη σουσ  |
|                   |   |  | • . ,   |   | <u> </u>          |                     | _                         |  |
|                   |   | etails About M   |   |   |                   |                     |                           |  |
|                   | timate monthly inco<br>n-filing spouse unless   |  |   | <ul><li>n. If you have noth</li></ul>                         | ing to            | report              | for any line              | , write \$0 in the space. Include your   |
| -                 | ou or your non-filing s<br>u need more space, a   | •  |   | er, combine the info  | ormati            | on for a            | all employe               | rs for that person on the lines below. If  |
|                   |   |  |   |   |                   | For D               | ebtor 1                   | For Debtor 2 or non-filing spouse  |
| 2.                | List monthly gros<br>payroll deductions)<br>would be.                                     |  |   |   | 2.                | \$                  | 3,670.33                  |  |
| 3.                | Estimate and list i   | monthly overtime   | pay.  |   | 3. 👍              |                     | \$0.00                    |  |
| 4.                | Calculate gross in  | come. Add line 2   | + line 3.   |   | 4.                | \$                  | 3,670.33                  |  |

Official Form 106l Schedule I: Your Income page 1

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| Deb | tor 1 | Joy                              | L   | Neely   |              | Case nur            | mber (if know | m)           |                        |     |
|-----|-------|----------------------------------|---|---|--------------|---------------------|---------------|--------------|------------------------|-----|
|     |       | First Name                       | Middle Name   | Last Name   | F            | For Debtor 1        | For Debto     |              |                        |     |
|     | Cop   | v line 4 here                    |   | <b>→</b>  | 4.           | \$3,670.33          |               |              |                        |     |
| 5.  | -     | all payroll ded                  |   | -   |              |                     |               |              |                        |     |
|     |       |                                  | e, and Social Security de   | eductions   | 5a.          | \$669.49            |               |              |                        |     |
|     | 5b.   | Mandatory co                     | ontributions for retireme   | nt plans  | 5b.          | \$0.00              |               |              |                        |     |
|     | 5c.   | Voluntary cor                    | ntributions for retiremen   | t plans   | 5c.          | \$73.67             |               |              |                        |     |
|     | 5d.   | Required rep                     | ayments of retirement fu  | ind loans   | 5d.          | \$0.00              |               |              |                        |     |
|     | 5e.   | Insurance                        |   |   | 5e.          | \$338.00            |               |              |                        |     |
|     | 5f.   | Domestic sup                     | pport obligations   |   | 5f.          | \$0.00              |               |              |                        |     |
|     | 5g.   | Union dues                       |   |   | 5g.          | \$0.00              |               |              |                        |     |
|     | 5h.   | Other deduct<br>Specify:         | ions.   |   | 5h. <b>+</b> | \$0.00              |               |              |                        |     |
| 6.  |       | <b>l the payroll de</b><br>- 5h. | eductions. Add lines 5a   | a + 5b + 5c + 5d + 5e + 5f +                            | 6.           | \$1,081.16          |               |              |                        |     |
| 7.  | Cald  | culate total mo                  | onthly take-home pay.   | Subtract line 6 from line 4.                            | 7.           | \$2,589.17          |               |              |                        |     |
| 8.  | List  | all other inco                   | me regularly received:  |   |              |                     |               |              |                        |     |
|     | 8a.   |                                  | rom rental property and of<br>ofession, or farm   | from operating a  | 8a.          | \$0.00              |               |              |                        |     |
|     |       | gross receipts                   | ment for each property an<br>s, ordinary and necessary<br>hly net income.                         | · ·   |              |                     |               |              |                        |     |
|     | 8b.   | Interest and o                   | dividends   |   | 8b.          | \$0.00              |               |              |                        |     |
|     | 8c.   |                                  | ort payments that you, a egularly receive   | non-filing spouse, or a                                 | 8c.          | \$0.00              |               |              |                        |     |
|     |       |                                  | ny, spousal support, child ment, and property settlen   | • •   |              |                     |               |              |                        |     |
|     | 8d.   | Unemployme                       | ent compensation  |   | 8d.          | \$0.00              |               |              |                        |     |
|     | 8e.   | Social Securi                    | ity   |   | 8e.          | \$0.00              |               |              |                        |     |
|     | 8f.   | Other govern                     | ment assistance that yo   | u regularly receive                                     |              |                     |               |              |                        |     |
|     |       | cash assistan                    | assistance and the value (<br>ce that you receive, such<br>er the Supplemental Nutrit<br>bsidies. | as food stamps  |              |                     |               |              |                        |     |
|     |       | Specify:                         |   |   | 8f.          | \$0.00              |               |              |                        |     |
|     | 8g.   | Pension or re                    | etirement income  |   | 8g.          | \$0.00              |               |              |                        |     |
|     | 8h.   | Other monthl                     | ly income.  |   |              |                     |               |              |                        |     |
|     |       | Specify:                         |   |   | 8h. <b>+</b> | \$0.00              |               |              |                        |     |
| 9.  | Add   | l all other inco                 | me. Add lines 8a + 8b +   | 8c + 8d + 8e + 8f + 8g + 8h.                            | 9.           | \$0.00              |               |              |                        |     |
| 10. |       |                                  | r income. Add line 7 + lir ine 10 for Debtor 1 and De   | ne 9.<br>ebtor 2 or non-filing spouse.                  | 10.          | \$2,589.17          | +             | ]=           | \$2,589.1              | 17  |
| 11. | Inclu |                                  | ns from an unmarried part   | expenses that you list in Soner, members of your househ |              |                     | ur roommates  | s, and other | r                      |     |
|     | Do r  | not include any                  | amounts already included  | I in lines 2-10 or amounts that                         | t are no     | t available to pay  | expenses list | ed in Sche   | dule J.                |     |
|     | Spe   | cify:                            |   |   |              |                     |               | _ 11. +      | \$0.0                  | )0_ |
| 12  | Δdd   | I the amount in                  | n the last column of line   | 10 to the amount in line 11.                            | The res      | sult is the combine | ed monthly    | 12.          | \$2,589.1              | 17  |
| 12. | inco  |                                  |   | of Your Assets and Liabilities                          |              |                     |               | 12.          | Combined monthly incor |     |
| 13. | Dov   | you expect an                    | increase or decrease wi   | thin the year after you file th                         | his forn     | n?                  |               |              | ,                      | -   |
| -   |       | No. Yes. Explain:                | None.   | ,,  |              |                     |               |              |                        |     |
|     | _     | '                                |   |   |              |                     |               |              |                        |     |

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| F   | ill in this inform                                       | nation to ide                                | ntify your ca                   | ase:                |   | Cha     | ak if thia           | io                         |                              |
|-----|--|--|---------------------------------|---------------------|---|---------|----------------------|----------------------------|------------------------------|
|     | Debtor 1   | Joy  |                                 | Neel                | v   | Che     | ck if this<br>An ame | ns:<br>ended filing        |                              |
|     | 200101   | First Name                                   | Middle N                        |                     |   | ᅢ       |                      | lement showing             | postpetition                 |
|     | Debtor 2<br>(Spouse, if filing)                          | First Name                                   | Middle N                        | ame Last N          | ame   | _       | chapter<br>followin  | · 13 expenses a<br>g date: | s of the                     |
|     | United States Bankr                                      | uptcy Court for t                            | he: <b>NORTH</b>                | ERN DISTRICT O      | F ILLINOIS                                      |         | MM / D               | D / YYYY                   |                              |
|     | Case number  | ., .,  |                                 |                     |   |         | IVIIVI / DI          | וווון/ט                    |                              |
|     | (if known)   |  |                                 |                     |   |         |                      |                            |                              |
| 0   | fficial Form 10  | <u>6J</u>                                    |                                 |                     |   |         |                      |                            |                              |
| S   | chedule J: Yo  | ur Expens                                    | ses                             |                     |   |         |                      |                            | 12/1                         |
| nai | rrect information. If                                    | more space is                                | needed, attac<br>inswer every q | h another sheet to  | ling together, both ar<br>this form. On the top |         |                      |                            |                              |
| 1.  | Is this a joint cas                                      | e?   |                                 |                     |   |         |                      |                            |                              |
| 2.  | ✓ No. Go to lin  Yes. <b>Does</b> D                      | e 2.<br>ebtor 2 live in a<br>s. Debtor 2 mus | -                               |                     | es for Separate Housel                          | nold of | f Debtor :           | 2.                         |                              |
|     | Do not list Debtor                                       | -  | Yes. Fill o                     | ut this information | Dependent's relation Debtor 1 or Debtor         |         | p to                 | Dependent's age            | Does dependen live with you? |
|     | Debtor 2.  |  |                                 |                     |   |         |                      | 15                         | □ No                         |
|     | Do not state the de                                      | ependents'                                   |                                 |                     |   |         |                      |                            | - ☑ Yes<br>□ No              |
|     | names.   |  |                                 |                     |   |         |                      | 11                         | - ☑ Yes                      |
|     |  |  |                                 |                     |   |         |                      |                            | ☐ No                         |
|     |  |  |                                 |                     |   |         |                      |                            | Yes                          |
|     |  |  |                                 |                     |   |         |                      |                            | □ No<br>- □ Yes              |
|     |  |  |                                 |                     |   |         |                      |                            | ☐ No                         |
|     |  |  |                                 |                     |   |         |                      |                            | - Yes                        |
| 3.  | Do your expense<br>expenses of peop<br>yourself and your | ole other than                               | ✓ No   ✓ Yes                    |                     |   |         |                      |                            |                              |
| G   | Part 2: Estima   | ate Your Ong                                 | joing Month                     | ly Expenses         |   |         |                      |                            |                              |
| to  |  | of a date after                              | the bankruptcy                  | -                   | are using this form as<br>a supplemental Sched  |         |                      | -                          |                              |
|     | lude expenses paid<br>ch assistance and h                |  | •                               | •                   | u know the value of<br>icial Form 106l.)        |         |                      | Your expens                | ses                          |
| 4.  | The rental or hom<br>Include first mortga                |  |                                 |                     |   |         | 4                    | 1                          | \$900.00                     |
|     | If not included in                                       |  | ,                               | <b>3</b>            |   |         |                      |                            |                              |
|     | 4a. Real estate ta                                       | axes   |                                 |                     |   |         | 4                    | ła                         |                              |
|     | 4b. Property, hon  | neowner's, or rer                            | nter's insurance                | <b>:</b>            |   |         | 4                    | łb                         |                              |
|     | 4c. Home mainte  | nance, repair, a                             | nd upkeep expe                  | enses               |   |         | 4                    | łc                         |                              |
|     | 4d Homeowner's   | association or (                             | condominium d                   | uec                 |   |         | ,                    | 1d                         |                              |

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| Deb | tor 1      | Joy<br>First Name                    | <b>L</b><br>Middle Name                     | Neely Last Name   | Case number (if known) |  |
|-----|------------|--------------------------------------|---|---|------------------------|--|
|     |            |                                      |   |   | Your expense           | es.  |
| 5.  | Δdd        | litional mortgag                     | e navments for vour resid                   | lence, such as home equity loans  | 5.                     |  |
| 6.  |            | ties:                                | o payments for your resid                   | terioc, such as nome equity leans   | <u> </u>               |  |
|     | 6a.        | Electricity, heat,                   | . natural gas                               |   | 6a.                    | \$250.00                                       |
|     | 6b.        | •                                    | arbage collection                           |   | 6b.                    | <del></del>                                    |
|     | 6c.        | •                                    | phone, Internet, satellite, a               | nd  | 6c.                    | \$200.00                                       |
|     | 0.1        | cable services                       |   |   |                        | <u>.                                      </u> |
| _   |            |                                      |   |   | 6d                     |  |
| 7.  |            | d and housekee                       |   |   | 7.                     | \$600.00                                       |
| 8.  |            |                                      | ren's education costs                       |   | 8.                     | <b>*</b> 405.00                                |
| 9.  |            |                                      | and dry cleaning                            |   | 9.                     | \$125.00                                       |
| 10. |            | ·                                    | ucts and services                           |   | 10.                    | \$50.00  |
|     |            | lical and dental                     | •   |   | 11.                    | \$200.00                                       |
| 12. |            | . Do not include                     | lude gas, maintenance, but<br>car payments. | s or train  | 12.                    | \$250.00                                       |
| 13. |            | ertainment, club<br>jazines, and boo | s, recreation, newspaper<br>oks             | s,  | 13.                    | \$14.00  |
| 14. | Cha        | ritable contribu                     | tions and religious donat                   | ions  | 14.                    |  |
| 15. |            | irance.                              |   |   |                        |  |
|     |            |                                      |   | ay or included in lines 4 or 20.  |                        |  |
|     |            | Life insurance                       |   |   |                        |  |
|     | 15b.       |                                      |   |   | 15b                    |  |
|     | 15c.       | Vehicle insura                       | ince  |   | 15c                    |  |
|     | 15d.       |                                      |   |   | 15d                    |  |
| 16. | Tax<br>Spe |                                      | •   | our pay or included in lines 4 or 20.                                       | 16.                    |  |
| 17. | Inst       | allment or lease                     | payments:                                   |   |                        |  |
|     | 17a.       | . Car payments                       | for Vehicle 1                               |   | 17a.                   |  |
|     | 17b.       | . Car payments                       | for Vehicle 2                               |   | 17b.                   |  |
|     | 17c.       | Other. Specif                        | y:  |   | 17c.                   |  |
|     | 17d.       | Other. Specif                        | y:  |   | 17d.                   |  |
| 18. |            |                                      |   | d support that you did not report as<br>, Your Income (Official Form 106I). | 18.                    |  |
| 19. | Oth<br>Spe |                                      | u make to support others                    | who do not live with you.   | 19.                    |  |

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| Deb | tor 1 | Joy                                   | L   | Neely   | Case number (if knowr                           | າ)         |
|-----|-------|---------------------------------------|---|---|---|------------|
|     |       | First Name                            | Middle Name                                       | Last Name   |   |            |
| 20. |       | er real property<br>edule I: Your Inc |   | lines 4 or 5 of this form or                                    | on  |            |
|     | 20a.  | Mortgages on                          | other property                                    |   | 20a.  |            |
|     | 20b.  | Real estate ta                        | xes   |   | 20b.  |            |
|     | 20c.  | Property, hom                         | eowner's, or renter's insura                      | nce   | 20c.  |            |
|     | 20d.  | Maintenance,                          | repair, and upkeep expens                         | es  | 20d.  |            |
|     | 20e.  | Homeowner's                           | association or condominiur                        | n dues  | 20e.  |            |
| 21. | Othe  | er. Specify:                          |   |   | 21.   | <b>+</b>   |
| 22. | Calc  | ulate your mon                        | thly expenses.                                    |   |   |            |
|     | 22a.  | Add lines 4 th                        | rough 21.   |   | 22a.  | \$2,589.00 |
|     | 22b.  | Copy line 22 (                        | monthly expenses for Debte                        | or 2), if any, from Official For                                | m 106J-2. 22b.                                  |            |
|     | 22c.  | Add line 22a a                        | and 22b. The result is your                       | monthly expenses.   | 22c.  | \$2,589.00 |
| 23. | Calc  | ulate your mon                        | thly net income.                                  |   | _   |            |
|     | 23a.  | Copy line 12 (                        | your combined monthly inco                        | ome) from Schedule I.   | 23a.  | \$2,589.17 |
|     | 23b.  | Copy your mo                          | nthly expenses from line 22                       | c above.  | 23b. <b>-</b>                                   | \$2,589.00 |
|     | 23c.  |                                       | monthly expenses from you our monthly net income. | ir monthly income.  | 23c.  | \$0.17     |
| 24. | Do y  | ou expect an ir                       | ncrease or decrease in you                        | ur expenses within the year                                     | r after you file this form?                     |            |
|     | payn  |                                       |   | your car loan within the year nodification to the terms of year | or do you expect your mortgage<br>our mortgage? |            |
|     |       | Yes. Explain he None.                 | ere:  |   |   |            |

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| Fill in this information to identify your case: |                          |                           |                    |     |  |  |
|---|--------------------------|---------------------------|--------------------|-----|--|--|
| Debtor 1  | <b>Joy</b><br>First Name | <b>L</b><br>Middle Name   | Neely<br>Last Name |     |  |  |
| Debtor 2<br>(Spouse, if filing)                 | First Name               | Middle Name               | Last Name          |     |  |  |
| United States Bar                               | nkruptcy Court fo        | or the: <b>NORTHERN D</b> | ISTRICT OF ILLING  | DIS |  |  |
| Case number (if known)                          |                          |                           |                    |     |  |  |

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Р  | art 1: Summarize Your Assets   |                                      |
|----|--|--------------------------------------|
| 4  | Schodulo A/R: Proporty (Official Form 106A/R)  | Your assets<br>Value of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | \$0.00                               |
|    | Ta. Copy line 55, Total real estate, from Schedule A/B   |                                      |
|    | 1b. Copy line 62, Total personal property, from Schedule A/B   | \$12,850.00                          |
|    | 1c. Copy line 63, Total of all property on Schedule A/B  | \$12,850.00                          |
| Р  | art 2: Summarize Your Liabilities  |                                      |
|    |  | Your liabilities<br>Amount you owe   |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$18,603.00                          |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                           | \$0.00                               |
|    | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | +\$8,205.00                          |
|    | Your total liabilities   | \$26,808.00                          |
| P  | art 3: Summarize Your Income and Expenses  |                                      |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | \$2,589.17                           |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  | \$2,589.00                           |

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| Deb | tor 1   |   | ımber (if known) |   |  |  |  |  |
|-----|---|---|------------------|---|--|--|--|--|
| Pa  | First Name Middle Name Last Name  Answer These Questions for Administrative and Statistical Records   |   |                  |   |  |  |  |  |
| 6.  | Are you filing for bankruptcy under Chapters 7, 11, or 13?  |   |                  |   |  |  |  |  |
|     | No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  Yes   |   |                  |   |  |  |  |  |
| 7.  | Wha   | kind of debt do you have?   |                  |   |  |  |  |  |
|     | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.  Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit |   |                  |   |  |  |  |  |
|     | this form to the court with your other schedules.   |   |                  |   |  |  |  |  |
| 8.  | . From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.  \$3,500.50  |   |                  |   |  |  |  |  |
| 9.  | Сору  | the following special categories of claims from Part 4, line 6 of Schedule E/F: |                  |   |  |  |  |  |
|     |   |   | Total claim      |   |  |  |  |  |
|     | Fron  | Part 4 on Schedule E/F, copy the following:                                     |                  |   |  |  |  |  |
|     | 9a.   | Domestic support obligations. (Copy line 6a.)                                   | \$0.0            | 0 |  |  |  |  |
|     | 9b.   | Taxes and certain other debts you owe the government. (Copy line 6b.)           | \$0.0            | 0 |  |  |  |  |
|     | 9c.   | Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$0.0            | 0 |  |  |  |  |

9d. Student loans. (Copy line 6f.)

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$0.00

\$0.00

\$0.00

\$0.00

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| n     |
|-------|
|       |
| 12/15 |
|       |
| 0     |
|       |
|       |
|       |

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

| X /s/ Joy L Neely                        | X                     |
|--|-----------------------|
| Joy L Neely, Debtor 1                    | Signature of Debtor 2 |
| Date <u>07/12/2016</u><br>MM / DD / YYYY | Date MM / DD / YYYY   |

Yes. Name of person

Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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| Fill in this in      | formation to         | identify your case        | :                           |   |       |
|----------------------|----------------------|---------------------------|-----------------------------|---|-------|
| Debtor 1             | Joy                  | L                         | Neely                       |   |       |
|                      | First Name           | Middle Name               | Last Name                   | _   |       |
| Debtor 2             |                      |                           |                             |   |       |
| (Spouse, if filing   | ) First Name         | Middle Name               | Last Name                   |   |       |
| United States Ba     | ankruptcy Court fo   | or the: <b>NORTHERN D</b> | ISTRICT OF ILLINOIS         |   |       |
| Case number          |                      |                           |                             | _   |       |
| (if known)           |                      |                           |                             | ☐ Check if this is an amended filing  |       |
| Official Form        | . 107                |                           |                             |   |       |
| Official Forn        |                      |                           |                             |   |       |
| Statement of         | of Financia          | l Affairs for Ind         | ividuals Filing for         | r Bankruptcy  | 04/16 |
| Part 1: Gi           | ve Details Ab        | out Your Marital S        | tatus and Where You         | ı Lived Before  |       |
| •                    | r current marital    | status?                   |                             |   |       |
| ☐ Married ☑ Not marr | ied                  |                           |                             |   |       |
| 2. During the la     | ast 3 years, have    | you lived anywhere o      | ther than where you live    | now?  |       |
| <b>☑</b> No          |                      |                           |                             |   |       |
| Yes. Lis             | t all of the places  | you lived in the last 3 y | ears. Do not include where  | you live now.   |       |
| (Community           | • •                  | •                         | • .                         | a community property state or territory? uisiana, Nevada, New Mexico, Puerto Rico, Texas, |       |
| <b>☑</b> No          |                      |                           |                             |   |       |
| ☐ Yes. Ma            | ike sure you fill ou | it Schedule H: Your Co    | debtors (Official Form 106F | l).   |       |

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| Debtor 1           | <b>Joy</b><br>First Name                 | <b>L</b><br>Middle Name                       | Neely Case nur  |  | mber (if known)  |  |  |
|--------------------|--|---|---|--|--|--|--|
| Part 2             | 2: Explain th                            | ne Sources of Y                               | our Income  |  |  |  |  |
| Fill               | in the total amount                      | of income you rece                            | nent or from operating a bu<br>ived from all jobs and all bus<br>income that you receive toge                                 | inesses, including par                               | t-time activities.   | endar years?   |  |
|                    | No<br>Yes. Fill in the det               | ails.   |   |  |  |  |  |
|                    |  |   | Debtor 1  |  | Debtor 2   |  |  |
|                    |  |   | Sources of income<br>Check all that apply.  | Gross income<br>(before deductions<br>and exclusions | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions<br>and exclusions |  |
|                    | nuary 1 of the cur<br>you filed for bank | •   | <ul><li>✓ Wages, commissions, bonuses, tips</li><li>✓ Operating a business</li></ul>  | \$21,000.00  | <ul><li></li></ul>   |  |  |
|                    | ast calendar year: 1 to December 31      |   | <ul><li>✓ Wages, commissions, bonuses, tips</li><li>✓ Operating a business</li></ul>  | \$40,000.00  | <ul><li>☐ Wages, commissions, bonuses, tips</li><li>☐ Operating a business</li></ul> |  |  |
|                    | calendar year before 1 to December 31,   |   | <ul><li>✓ Wages, commissions, bonuses, tips</li><li>✓ Operating a business</li></ul>  | \$35,000.00  | <ul><li></li></ul>   |  |  |
| Incl<br>une<br>and | ude income regard<br>mployment; and ot   | less of whether that<br>her public benefit pa | g this year or the two previ<br>income is taxable. Example<br>ayments; pensions; rental inc<br>are in a joint case and you ha | s of other income are<br>come; interest; dividen     | ds; money collected from lav   | vsuits; royalties;                                   |  |
|                    |  | -   | m each source separately. [   | Oo not include income                                | that you listed in line 4.   |  |  |

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| Deb |  | <b>Joy</b><br>First Name                                    | L<br>Middle Name                             | Neely<br>Last Name                                      | Case number (if known)  |  |  |  |  |
|-----|--|---|--|---|---|--|--|--|--|
|     |  | riist Name  | widdle warrie                                | Last Name   |   |  |  |  |  |
| Pa  | art 3:   | List Ce   | rtain Payments Yo                            | u Made Before You F                                     | iled for Bankruptcy   |  |  |  |  |
| 6.  | Are eith   | er Debtor 1's or Debtor 2's debts primarily consumer debts? |  |   |   |  |  |  |  |
|     | □ No.  |   |  | has primarily consumer drily for a personal, family, or | ebts. Consumer debts are defined in 11 U.S.C. § 101(8) as household purpose."   |  |  |  |  |
|     |  | During tl   | he 90 days before you fi                     | led for bankruptcy, did you                             | pay any creditor a total of \$6,425* or more?   |  |  |  |  |
|     |  | ☐ No.   | Go to line 7.                                |   |   |  |  |  |  |
|     |  | ☐ Yes.  | total amount you paid t                      | hat creditor. Do not include                            | of \$6,425* or more in one or more payments and the payments for domestic support obligations, such as syments to an attorney for this bankruptcy case. |  |  |  |  |
|     |  | * Subjec  | ct to adjustment on 4/01/                    | 19 and every 3 years after                              | hat for cases filed on or after the date of adjustment.   |  |  |  |  |
|     | ✓ Yes.   | Debtor '  | 1 or Debtor 2 or both h                      | ave primarily consumer d                                | ebts.   |  |  |  |  |
|     |  | During tl   | he 90 days before you fi                     | led for bankruptcy, did you                             | pay any creditor a total of \$600 or more?  |  |  |  |  |
|     |  | ✓ No.   | Go to line 7.                                |   |   |  |  |  |  |
|     |  | ☐ Yes.  | creditor. Do not include                     |   | of \$600 or more and the total amount you paid that pport obligations, such as child support and alimony. is bankruptcy case.                           |  |  |  |  |
| 7.  | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? <i>Insiders</i> include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managagent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations such as child support and alimony. |   |  |   |   |  |  |  |  |
|     | ✓ No<br>☐ Yes.   | List all pa   | ayments to an insider.                       |   |   |  |  |  |  |
| 8.  |  | year befo<br>d an insid                                     | -  | ptcy, did you make any pa                               | syments or transfer any property on account of a debt that  |  |  |  |  |
|     | Include p  | payments on debts guaranteed or cosigned by an insider.     |  |   |   |  |  |  |  |
|     | ✓ No<br>☐ Yes.   | List all pa   | List all payments that benefited an insider. |   |   |  |  |  |  |
|     |  |   |  |   |   |  |  |  |  |
| Pa  | art 4:   | Identify  | y Legal Actions, Re                          | epossessions, and Fo                                    | preclosures   |  |  |  |  |
| 9.  | List all su  | uch matter  |  |   | any lawsuit, court action, or administrative proceeding? ons, divorces, collection suits, paternity actions, support or custody                         |  |  |  |  |
|     | ✓ No<br>☐ Yes.   | Fill in the   | details.                                     |   |   |  |  |  |  |

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| Deb  | tor 1         | Joy   | L                     | Neely  | Case number (if ki   | nown)                                   |                   |
|--|---------------|---|-----------------------|--|--|---|-------------------|
|  |               | First Name  | Middle Name           | Last Name  |  |   |                   |
| 10.  | seized,       | 1 year before you fil<br>or levied?<br>all that apply and fill in | •                     |  | operty repossessed, foreclosed   | d, garnished, attach                    | ed,               |
|  |               | Go to line 11.<br>Fill in the informati                           | on below.             |  |  |   |                   |
| 11.  |               |   |                       | iptcy, did any creditor,<br>make a payment becau | including a bank or financial insuse you owed a debt?                                    | stitution, set off any                  | ,                 |
|  | ✓ No<br>☐ Yes | s. Fill in the details.   |                       |  |  |   |                   |
| 12.  |               |   |                       | tcy, was any of your prustodian, or another off  | operty in the possession of an airicial?   | assignee for the be                     | nefit of          |
|  | ✓ No<br>☐ Yes | 3   |                       |  |  |   |                   |
| Pa   | art 5:        | List Certain G  | ifts and Con          | tributions                                       |  |   |                   |
| 13.  | Within        | 2 years before you f  | filed for bankru      | ptcy, did you give any                           | gifts with a total value of more t   | han \$600 per perso                     | n?                |
|  | ✓ No<br>☐ Yes | s. Fill in the details fo   | or each gift.         |  |  |   |                   |
| 14.  |               | 2 years before you f<br>charity?                                  | filed for bankru      | ptcy, did you give any                           | gifts or contributions with a tota   | al value of more tha                    | n \$600           |
|  | ✓ No<br>☐ Yes | s. Fill in the details fo   | or each gift or co    | ontribution.                                     |  |   |                   |
| Pa   | art 6:        | List Certain Lo   | osses                 |  |  |   |                   |
| 15.  |               | 1 year before you fil<br>isaster, or gambling                     | •                     | tcy or since you filed fo                        | or bankruptcy, did you lose any  | thing because of th                     | eft, fire,        |
|  | ✓ No<br>☐ Yes | s. Fill in the details.   |                       |  |  |   |                   |
| Pa   | art 7:        | List Certain Pa   | ayments or 1          | Transfers  |  |   |                   |
| 16.  | anyone        | you consulted abo   | ut seeking ban        | kruptcy or preparing a                           | else acting on your behalf pay obankruptcy petition? eling agencies for services require |   |                   |
|  | □ No ☑ Yes    | s. Fill in the details.   |                       |  |  |   |                   |
| Robert J. Adams & Associates Person Who Was Paid |               |   | es                    | •  | of any property transferred applied to filing fee and                                    | Date payment<br>or transfer was<br>made | Amount of payment |
| 901 W. Jackson, Suite 202                        |               |   |                       | ., .   |  | 07/09/2016                              |                   |
| Num  | ber Str       | eet   |                       |  |  |   |                   |
| Chi<br>City                                      | cago          | IL<br>State   | <b>60607</b> ZIP Code |  |  |   |                   |
| Emai   | il or websit  | e address   |                       |  |  |   |                   |
| Perso  | on Who M      | lade the Payment, if Not  | You                   |  |  |   |                   |

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| Deb   | tor 1   | <b>Joy</b><br>First Name                   | L<br>Middle Name       | Neely<br>Last Name  | Case number (if known)                                |  |  |  |
|---|---|--|------------------------|---|---|--|--|--|
| 17.   | Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?  Do not include any payment or transfer that you listed on line 16. |  |                        |   |   |  |  |  |
| 40  | _   | Fill in the details.                       | illad fan handmuntau   | did yay asll tanda an albanyin  |   |  |  |  |
| 18.   | 3. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?   |  |                        |   |   |  |  |  |
| Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. |   |  |                        |   |   |  |  |  |
|   | ✓ No<br>☐ Yes.  | Fill in the details.                       |                        |   |   |  |  |  |
| 19.   |   |  |                        | did you transfer any property asset-protection devices.)              | to a self-settled trust or similar device of which    |  |  |  |
|   | ✓ No<br>☐ Yes.  | . Fill in the details.                     |                        |   |   |  |  |  |
| Pa  | art 8:  | List Certain Fi                            | nancial Accounts       | s, Instruments, Safe Depo   | osit Boxes, and Storage Units                         |  |  |  |
| 20.   |   | year before you file closed, sold, move    |                        | ere any financial accounts or i                                       | nstruments held in your name, or for your             |  |  |  |
|   |   |  | •                      | financial accounts; certificates of and other financial institutions. | of deposit; shares in banks, credit unions, brokerage |  |  |  |
|   | ✓ No<br>☐ Yes.  | Fill in the details.                       |                        |   |   |  |  |  |
| 21.   | -   | now have, or did yourities, cash, or othe  | •                      | before you filed for bankrupto  | y, any safe deposit box or other depository           |  |  |  |
|   | ✓ No<br>☐ Yes.  | Fill in the details.                       |                        |   |   |  |  |  |
| 22.   |   | u stored property in                       | n a storage unit or pl | ace other than your home with   | in 1 year before you filed for bankruptcy?            |  |  |  |
|   | ✓ No<br>☐ Yes.  | . Fill in the details.                     |                        |   |   |  |  |  |
| Pa  | art 9:  | Identify Prope                             | rty You Hold or C      | Control for Someone Else  | ,   |  |  |  |
| 23.   | -   | hold or control any<br>in trust for someon |                        | ne else owns? Include any pr  | operty you borrowed from, are storing for,            |  |  |  |
|   | ✓ No<br>☐ Yes.  | . Fill in the details.                     |                        |   |   |  |  |  |

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| Deb | otor 1           | Joy  | L   | Neely   | Case number (if known)   |         |
|-----|------------------|--|---|---|--|---------|
|     |                  | First Name   | Middle Name   | Last Name   |  |         |
| P   | art 10:          | Give Details A   | bout Environme  | ntal Information                                    |  |         |
| or  | the purp         | oose of Part 10, the f   | ollowing definitions                                    | apply:  |  |         |
| ı   | hazardoı         | us or toxic substanc   | e, wastes, or materi                                    | al into the air, land, soil                         | on concerning pollution, contamination, releas<br>, surface water, groundwater, or other mediun<br>ances, wastes, or material. |         |
|     |                  | •  | • • • •   | defined under any envir<br>luding disposal sites.   | onmental law, whether you now own, operate   | , or    |
|     |                  |  |   | mental law defines as a<br>minant, or similar item. | hazardous waste, hazardous substance, toxic  | :       |
| Rep | oort all n       | otices, releases, and  | d proceedings that y                                    | ou know about, regardl                              | ess of when they occurred.   |         |
| 24. | Has an<br>law?   | y governmental unit  | notified you that yo                                    | ou may be liable or poter                           | ntially liable under or in violation of an enviror   | nmental |
|     | ✓ No             | s. Fill in the details.  |   |   |  |         |
| 25. | -                |  | rnmental unit of any                                    | release of hazardous r                              | naterial?  |         |
|     | ✓ No<br>☐ Yes    | s. Fill in the details.  |   |   |  |         |
| 26. | Have you         | • •  | ny judicial or admin                                    | istrative proceeding und                            | der any environmental law? Include settlemer   | nts and |
|     | ✓ No<br>☐ Yes    | s. Fill in the details.  |   |   |  |         |
| Ρ   | art 11:          | Give Details A   | bout Your Busin   | ess or Connections                                  | s to Any Business  |         |
| 27. | Within<br>busine | •  | iled for bankruptcy,                                    | did you own a business                              | s or have any of the following connections to a  | any     |
|     |                  | A member of a limit A partner in a partner An officer, director, | ed liability company (<br>ership<br>or managing executi | (LLC) or limited liability pa                       |  |         |
|     |                  | None of the above as. Check all that apply                       |   | 2.<br>e details below for each bu                   | usiness.   |         |
| 28. |                  | 2 years before you f   |   |   | statement to anyone about your business? In  | nclude  |
|     | □ No             | s. Fill in the details be  | elow.   |   |  |         |

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| Debtor 1      | Joy                                  | L                       | Neely                      | Case number (if known)  |
|---------------|--------------------------------------|-------------------------|----------------------------|---|
|               | First Name                           | Middle Name             | Last Name                  |   |
| Part 12       | Sign Belov                           | W                       |                            |   |
| that answe    | ers are true and only fraud in conne | correct. I understand t | that making a false state  | tachments, and I declare under penalty of perjury ement, concealing property, or obtaining money or es up to \$250,000, or imprisonment for up to 20 years, |
| X /s/ Joy     | L Neely                              |                         | X                          | tor 2   |
| Joy L N       | eely, Debtor 1                       |                         | Signature of Deb           | tor 2   |
| Date _        | 07/12/2016                           | -                       | Date                       |   |
| Did you at    | tach additional p                    | pages to Your Statemen  | nt of Financial Affairs fo | r Individuals Filing for Bankruptcy (Official Form 107)?  |
| ✓ No<br>☐ Yes |                                      |                         |                            |   |
| Did you pa    | ay or agree to pa                    | y someone who is not    | an attorney to help you    | fill out bankruptcy forms?  |
| <b>√</b> No   |                                      |                         |                            |   |
|               | lame of person _                     |                         |                            | Attach the Bankruptcy Petition Preparer's Notice,   |
| •             | _                                    |                         |                            | Declaration, and Signature (Official Form 119).   |

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| Fill in this inf                            | ormation to id                         | entify your case                             | :               |                              | 4  |                     |                                    |
|---|--|--|-----------------|------------------------------|--|---------------------|------------------------------------|
| Debtor 1                                    | Joy<br>First Name                      | L<br>Middle Name                             | Neely<br>Last N |                              |  |                     |                                    |
| Debtor 2<br>(Spouse, if filing)             |  | Middle Name                                  | Last N          |                              |  |                     |                                    |
| United States Ba                            | nkruptcy Court for t                   | the: <b>NORTHERN D</b>                       | ISTRICT         | OF ILLINOIS                  |  |                     |                                    |
| Case number (if known)                      |  |  |                 |                              |  |                     | Check if this is an amended filing |
| Official Form                               | 108                                    |  |                 |                              |  |                     |                                    |
|   |  | or Individuals                               | s Filing        | Under Chap                   | ter 7  |                     | 12/15                              |
| If you are an indiv                         | idual filina undan                     | ahantar 7 yay mua                            | 4 fill and 4h   | o form if:                   |  |                     |                                    |
| -   | _                                      | chapter 7, you mus                           | t iiii out tiii | s ioiii ii.                  |  |                     |                                    |
|   |  | y your property, or                          |                 |                              |  |                     |                                    |
| •   |  | rty and the lease ha                         | -               |                              |  |                     |                                    |
|   | hever is earlier, u                    | •  | -               |                              | petition or by the dat<br>must also send copi                  |                     | -                                  |
| If two married peo                          |  | -  | , both are e    | qually responsible           | for supplying corre  | ct information.     |                                    |
| •   | •                                      | ssible. If more space<br>and case number (if |                 | ed, attach a separat         | te sheet to this form.   | . On the top of a   | ny                                 |
| Part 1: Lis                                 | t Your Credito                         | rs Who Hold Se                               | cured Cla       | aims                         |  |                     |                                    |
| -   | itors that you liste<br>rmation below. | ed in Part 1 of Sche                         | dule D: Cre     | editors Who Hold C           | Claims Secured by Pr   | roperty (Official F | orm 106D),                         |
| Identify the c                              | reditor and the pr                     | operty that is collat                        | eral            | What do you inten            |  | •                   | m the property<br>on Schedule C?   |
| Creditor's name:                            | Regional Acc                           | eptance Corp                                 |                 | Surrender the Retain the pro | property. perty and redeem it.                                 | □ No<br>□ Yes       |                                    |
| Description of<br>property<br>securing debt |  | CTS  |                 | Reaffirmation                | operty and enter into a<br>Agreement.<br>operty and [explain]: | a .                 |                                    |
|   |  | red Personal Pro                             | operty Le       | eases                        |  |                     |                                    |
| fill in the informat                        | ion below. Do no                       | t list real estate leas                      | ses. Unexp      | oired leases are lea         | Contracts and Unex<br>ses that are still in e                  | ffect; the lease p  | eriod has not                      |
|   |  | onal property leases                         |                 |                              |  |                     | be assumed?                        |

None.

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| Debtor 1  | <b>Joy</b><br>First Name     | L<br>Middle Name      | Neely<br>Last Name | Case number (if known)                                  |
|-----------|------------------------------|-----------------------|--------------------|---|
| Part 3:   | Sign Below                   |                       |                    |   |
|           | penalty of perjury, I o      |                       | •                  | about any property of my estate that secures a debt and |
| X /s/ Joy | ,                            | abject to all ullexpi | X                  |   |
|           | leely, Debtor 1              |                       | Signature of Del   | otor 2  |
| -         | 07/12/2016<br>MM / DD / YYYY |                       | Date MM / DD       | / <b>YYYY</b>   |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
   Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liqudation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

### **Chapter 7: Liquidation**

| + | \$75  | filing fee<br>administrative fee<br>trustee surcharge |
|---|-------|---|
| - | \$335 | total fee   |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form-sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

| + |         | filing fee<br>administrative fee |
|---|---------|----------------------------------|
|   | \$1,717 | total fee                        |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

\$200 filing fee \$75 administrative fee \$275 total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

## Chapter 13: Repayment plan for individuals with regular income

\$235 filing fee \$75 administrative fee \$310 total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

## Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html.

In Alabama and North Carolina, go to:

http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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B2030 (Form 2030) (12/15)

### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

| In | re Joy L Neely   | Case No.             |                                 |
|----|--|----------------------|---------------------------------|
|    |  | Chapter              | 7                               |
|    | DISCLOSURE OF COMPENSATION OF ATT  | ORNEY FOR            | DEBTOR                          |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am that compensation paid to me within one year before the filing of the petition i services rendered or to be rendered on behalf of the debtor(s) in contemplati is as follows: | n bankruptcy, or a   | agreed to be paid to me, for    |
|    | For legal services, I have agreed to accept  | \$1                  | 1,400.00                        |
|    | Prior to the filing of this statement I have received  |                      | \$0.00                          |
|    | Balance Due  | \$1                  | 1,400.00                        |
| 2. | The source of the compensation paid to me was:  ☑ Debtor ☐ Other (specify)   |                      |                                 |
| 3. | The source of compensation to be paid to me is:  |                      |                                 |
|    | ☑ Debtor ☐ Other (specify)   |                      |                                 |
| 4. | ☑ I have not agreed to share the above-disclosed compensation with any cassociates of my law firm.   | other person unle    | ss they are members and         |
|    | ☐ I have agreed to share the above-disclosed compensation with another passociates of my law firm. A copy of the agreement, together with a list compensation, is attached.  |                      |                                 |
| 5. | In return for the above-disclosed fee, I have agreed to render legal service fo  | r all aspects of the | e bankruptcy case, including:   |
|    | a. Analysis of the debtor's financial situation, and rendering advice to the debtankruptcy;  | otor in determining  | g whether to file a petition in |
|    | b. Preparation and filing of any petition, schedules, statements of affairs and  | plan which may b     | pe required;                    |
|    | c. Representation of the debtor at the meeting of creditors and confirmation   | hearing, and any     | adjourned hearings thereof;     |

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6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

#### **CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

07/12/2016 /s/ Robert J. Adams & Associates

Date

Robert J. Adams & Associates Robert J Adams & Associates 901 W Jackson Suite 202 Chicago, IL 60607

Phone: (312) 346-0100 / Fax: (312) 346-6228

Bar No. 0013056

/s/ Joy L Neely

Joy L Neely